



House of Representatives

General Assembly

File No. 695

January Session, 2007

Substitute House Bill No. 5751

House of Representatives, May 2, 2007

The Committee on Appropriations reported through REP. MERRILL of the 54th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT ESTABLISHING A PILOT FAMILY NURSE PRACTITIONER TRAINING PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. (NEW) (*Effective October 1, 2007*) (a) The Department of
2 Higher Education, in consultation with the Department of Public
3 Health, shall establish a pilot training program for nurse practitioners
4 seeking to specialize in family practice to receive one year of formal
5 training at a community-based health center located in an area
6 designated by the federal Health Resources and Services
7 Administration as a health professional shortage area, a medically
8 underserved area or an area with medically underserved populations.
- 9 (b) The Commissioner of Higher Education, in consultation with the
10 Commissioner of Public Health, shall establish eligibility requirements
11 for participation in the program.
- 12 (c) The pilot program shall commence on or before October 1, 2008,
13 and shall terminate not later than October 1, 2010.

This act shall take effect as follows and shall amend the following sections:

PH	Joint Favorable Subst. C/R	APP
APP	Joint Favorable Subst.	

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either chamber thereof for any purpose:

OFA Fiscal Note**State Impact:**

Agency Affected	Fund-Effect	FY 08 \$	FY 09 \$
Higher Ed., Dept.	GF - Cost	Indeterminate	Indeterminate

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill establishes a pilot training program for nurse practitioners seeking to specialize in family practice. It is unknown how much funding would be necessary to support the program, since it is unknown how many nurses would participate. The Department of Higher Education would require additional resources to staff the program, establish eligibility requirements, and administer the pilot.

The Out Years

The annualized ongoing fiscal impact identified above would continue through October 1, 2010.

OLR Bill Analysis**sHB 5751*****AN ACT ESTABLISHING A PILOT FAMILY NURSE PRACTITIONER TRAINING PROGRAM.*****SUMMARY:**

This bill requires the Department of Higher Education (DHE), in consultation with the Department of Public Health (DPH), to establish a pilot training program for nurse practitioners seeking to specialize in family practice. Under the program, the nurse practitioner receives one year of formal training at a community-based health center in a federally designated health professional shortage area, medically underserved area (MUA), or area with medically underserved populations (MUP).

The DHE commissioner, in consultation with the DPH commissioner, must establish program eligibility requirements. The pilot program must begin by October 1, 2008 and end by October 1, 2010.

DHE must report on the program to the Higher Education and Public Health committees by January 1, 2011.

EFFECTIVE DATE: October 1, 2007

BACKGROUND***Nurse Practitioners***

A nurse practitioner is a registered nurse who has completed advanced education (generally a minimum of a master's degree) and training in the diagnosis and management of common medical conditions, including chronic illnesses. Nurse practitioners provide a broad range of health care services.

Health Professional Shortage Area (HPSA), MUA, And MUP

The federal Health Resources and Services Administration (HRSA) develops health workforce shortage designation criteria to help determine whether a geographic area or population group is an HPSA, MUA, or MUP.

HPSAs may have shortages of primary medical care, dental, or mental health providers and may be urban or rural areas, population groups, or medical or other public facilities.

MUAs may be a whole county or group of contiguous counties, a group of county or civil divisions, or a group of urban census tracts where residents have a shortage of personal health services.

MUPs may include a group of people who face economic, cultural, or linguistic barriers to health care.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute Change of Reference
Yea 27 Nay 0 (03/21/2007)

Appropriations Committee

Joint Favorable Substitute
Yea 47 Nay 0